

Missouri

UNIFORM APPLICATION

FY 2021 Mental Health Block Grant Report

COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

OMB - Approved 04/19/2019 - Expires 04/30/2022
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Center for Mental Health Services

Division of State and Community Systems Development

A. State Information

State Information

State DUNS Number

Number 780871430

Expiration Date

I. State Agency to be the Grantee for the Block Grant

Agency Name Missouri Department of Mental Health

Organizational Unit Division of Behavioral Health

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III. State Expenditure Period (Most recent State expenditure period that is closed out)

From 7/1/2019

To 6/30/2020

IV. Date Submitted

NOTE: This field will be automatically populated when the application is submitted.

Submission Date 11/24/2020 9:33:20 AM

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V. Contact Person Responsible for Report Submission

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Footnotes:

B. Implementation Report

MHBG Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: 1

Priority Area: Coordination of Primary Care and Behavioral Health Services

Priority Type: SAT, MHS

Population(s): SMI, SED

Goal of the priority area:

Coordinate consumers' primary and behavioral healthcare in order to improve consumer health and reduce medical costs.

Strategies to attain the goal:

- 1) Continue to coordinate preventative and preventive and primary care for Health Home participants
- 2) Continue outreach to Medicaid-enrolled adults who 1) have a substance use disorder or serious mental illness, 2) have high annual healthcare costs, and 3) are not currently enrolled in behavioral health treatment
- 3) Contract with the Missouri Institute for Mental Health for ongoing evaluation of Missouri's Health Home programs.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of participants in Health Homes per fiscal year

Baseline Measurement: 31,616

First-year target/outcome measurement: 31,000

Second-year target/outcome measurement: 31,000

New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Medicaid Claims

New Data Source(if needed):

Description of Data:

The number of Health Home participants is determined from a Per member Per Month (PMPM) data file submitted to DMH from the Missouri Medicaid agency, MO HealthNet, on a monthly basis. These are individuals who participated at any time during the specified fiscal year.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of participants in Health Home for FY 2020 is 31,976.

Indicator #: 2
Indicator: Number of participants in DM 3700 per fiscal year
Baseline Measurement: 6,189
First-year target/outcome measurement: 5,000
Second-year target/outcome measurement: 5,000

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

A participant in DM 3700 is defined as a consumer who is listed on the master list of DM 3700 participants and has an open CPS or ADA episode of care during the specified fiscal year.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of participants in DM 3700 in FY 2020 is 6,911.

Indicator #: 3
Indicator: Number of participants in ADA Disease Management per fiscal year
Baseline Measurement: 750
First-year target/outcome measurement: 1300
Second-year target/outcome measurement: 1300

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

A participant in ADA Disease Management is defined as a consumer who is listed on the master list of ADA Disease Management participants and has an ADA or CPS open episode of care during the specified fiscal year.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of participants in ADA DM in FY 2020 is 2,345.

Priority #: 2
Priority Area: Crisis Intervention
Priority Type: SAT, MHS
Population(s): SMI, SED

Goal of the priority area:

Promote safety and emotional stability, minimize further deterioration in mental state, increase access to treatment and support services, and improve individual outcomes for individuals in behavioral health crisis; better utilize limited criminal justice and healthcare resources by linking individuals in need of behavioral healthcare services with those services.

Strategies to attain the goal:

- 1) Identify and address structural barriers, miscommunications, and consistent patterns that reduce access to behavioral healthcare services.
- 2) Provide behavioral health expertise to law enforcement, court personnel, and primary healthcare staff in order to more effectively respond to behavioral health crises.
- 3) Advocate for and engage individuals in crisis in behavioral health treatment and support services.
- 4) Provide immediate person-centered interventions to individuals in behavioral health crisis and facilitate timely access to services and supports.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of referrals to the CMHLs per fiscal year
Baseline Measurement: 10,250
First-year target/outcome measurement: 9,000
Second-year target/outcome measurement: 9,000
New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Coalition for Community Behavioral Healthcare

New Data Source(if needed):

Description of Data:

Number of CMHL contacts are tracked by the Missouri Coalition for Community Behavioral Healthcare

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

An Individual may account for more than one contact.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of referrals to the CMHLs in FY 2020 is 10,472.

Indicator #: 2

Indicator: Number served in the ERE project per fiscal year

Baseline Measurement: 1,837

First-year target/outcome measurement: 1,500

Second-year target/outcome measurement: 1,500

New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Coalition for Community Behavioral Healthcare

New Data Source(if needed):

Description of Data:

Number of served in the ERE project is tracked and reported by the Missouri Coalition for Community Behavioral Healthcare.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

none

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number served in the ERE project in FY 2020 is 2,029.

Indicator #: 3

Indicator: Number of new law enforcement officers trained in CIT per fiscal year

Baseline Measurement: 1,301

First-year target/outcome measurement: at least 900

Second-year target/outcome measurement: at least 900

New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Coalition for Community Behavioral Healthcare

New Data Source(if needed):

Description of Data:

Number of CIT officers trained is tracked and reported by the Missouri Coalition for Community Behavioral Healthcare.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number of law enforcement officers trained in CIT in FY 2020 is 1,217.

Indicator #: 4
Indicator: Number of ACI calls per fiscal year
Baseline Measurement: 73,468
First-year target/outcome measurement: 75,000
Second-year target/outcome measurement: 75,000
New Second-year target/outcome measurement(if needed):

Data Source:

Contracted Provider Reporting

New Data Source(if needed):**Description of Data:**

Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

none.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number of ACI calls in FY 2020 is 77,148.

Priority #: 3

Priority Area: Department of Corrections Community Supervised Offenders

Priority Type: SAT, MHS
Population(s): SMI, Other (Criminal/Juvenile Justice)

Goal of the priority area:

Improve access to clinically appropriate services

Strategies to attain the goal:

- 1) Monitor and target technical assistance to Probation and Parole Officers and treatment providers on the prioritization process for offenders needing substance use disorder treatment in order to facilitate rapid assessment and treatment initiation.
- 2) Maintain Memorandum of Understandings (MOU) with the Department of Corrections for coordination of behavioral health treatment services.
- 3) Continue the CMHT – Community Mental Health Treatment and OSMI - Offenders with Serious Mental Illness programs.
- 4) Continue to participate on the DOC Oversight Committee.
- 5) Coordinate with DOC to administrate the JRITP with a focus on reducing the risk of harm due to substance use and mental health conditions, reducing recidivism, improving opportunities for employment or education, and improving the availability of stable housing.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Current MOUs between DMH and DOC

Baseline Measurement: Yes

First-year target/outcome measurement: Yes

Second-year target/outcome measurement: Yes

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Contracts Unit

New Data Source(if needed):

Description of Data:

MOUs are maintained by the DMH Contracts Unit.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

MOU between DMH and DOC is current.

Indicator #: 2

Indicator: Number of Oversight Committee meetings

Baseline Measurement: 4

First-year target/outcome measurement: 4

Second-year target/outcome measurement: 4

New Second-year target/outcome measurement(if needed):**Data Source:**

The Division of Behavioral Health's Criminal Justice Services Manager is the organizer of the meetings.

New Data Source(if needed):**Description of Data:**

Oversight meetings are scheduled by the Division of Behavioral Health (DBH) Criminal Justice Services Manager.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number of Oversight Committee meetings conducted in FY 2020 is 13.

Indicator #:

3

Indicator:

Number of consumers served in Justice Reinvestment Initiative Treatment Pilot

Baseline Measurement:

N/A

First-year target/outcome measurement:

325

Second-year target/outcome measurement:

375

New Second-year target/outcome measurement(if needed):**Data Source:**

DMH Information System

New Data Source(if needed):**Description of Data:**

The number of consumers served in the Justice Reinvestment Initiative Treatment Pilot is tracked in the DMH Information System.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number served in the Justice Reinvestment Initiative Treatment Pilot in FY 2020 is 548.

Priority #: 4

Priority Area: Tobacco Prevention / Cessation

Priority Type: SAP, SAT, MHS

Population(s): SMI, SED, PP, Other (Adolescents w/SA and/or MH, Students in College, Rural, Children/Youth at Risk for BH Disorder)

Goal of the priority area:

Reduce tobacco initiation and promote tobacco cessation among vulnerable populations

Strategies to attain the goal:

- 1) Support provider training in tobacco cessation with proven effectiveness.
- 2) Promote the inclusion of tobacco cessation in the consumer's behavioral health treatment plan.
- 3) Support tobacco cessation in Missouri's college campuses.
- 4) Ensure the provision of tobacco enforcement and merchant education:
 - a. Continue contracting with the Food and Drug Administration for the enforcement of federal tobacco control laws
 - b. Maintain a Memorandum of Agreement with the Division of Alcohol and Tobacco Control for state and federal enforcement of tobacco control laws
 - c. Conduct a merchant education visit to every tobacco retailer in the state

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Annual Synar noncompliance rate is less than 20 percent

Baseline Measurement: Yes

First-year target/outcome measurement: Yes

Second-year target/outcome measurement: Yes

New Second-year target/outcome measurement(if needed):

Data Source:

Annual Synar Report

New Data Source(if needed):

Description of Data:

Synar rate is determined from the Annual Synar Survey. For FY 2020, the Annual Synar Survey will be completed by October 1, 2020. For FY 2021, the Annual Synar Survey will be completed by October 1, 2021.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The Annual Synar Retailer Violation Rate for FFY 2021 is 11.7%. Due to COVID-19 restrictions in FY 2020 and FY 2021, the Annual Synar Survey was completed by October 30, 2020.

Indicator #: 2

Indicator: Number of tobacco retailers visited and provided with retailer education materials per fiscal year

Baseline Measurement: 5,272

First-year target/outcome measurement: at least 5,000

Second-year target/outcome measurement: at least 5,000

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Database

New Data Source(if needed):

Description of Data:

Number of tobacco retailers visited and provided educational materials is documented by prevention agencies, entered into a database by DMH staff and reported in the State's Annual Synar Report.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of tobacco retailers visited and provided with retailer education materials in FY 2020 is 5,456.

Indicator #: 3

Indicator: Number of Tobacco Treatment Specialists per fiscal year

Baseline Measurement: 29

First-year target/outcome measurement: at least 25

Second-year target/outcome measurement: at least 25

New Second-year target/outcome measurement(if needed):

Data Source:

Division of Behavioral Health Prevention Unit

New Data Source(if needed):

Description of Data:

Number of Tobacco Treatment Specialists is tracked by prevention staff.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:**Report of Progress Toward Goal Attainment**

First Year Target:

☐

Achieved

☒

Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

No Tobacco Treatment Specialists were training in FY 2020 due to budget constraints as a result of the COVID-19 pandemic.

How first year target was achieved *(optional)*:

Priority #:

5

Priority Area:

Recovery Support Services

Priority Type:

SAT, MHS

Population(s):

SMI, SED, Other (Adolescents w/SA and/or MH, Rural, Criminal/Juvenile Justice, Homeless, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

Provide support services to promote sustained recovery from behavioral health disorders

Strategies to attain the goal:

- 1) Continue to grow the number of Certified Peer Specialists working in Missouri's behavioral health treatment and recovery system of care.
- 2) Continue the four Drop-In Centers and five Peer Support Phone Lines for persons with mental illness
- 3) Promote the use of IPS Support Employment
- 4) Promote the use of Family Support
- 5) Promote the use of Recovery Support Services
- 6) Maintain a housing unit to administer the Shelter Plus Care grants to provide housing assistance to the Chronically homeless

Annual Performance Indicators to measure goal success

Indicator #:

1

Indicator:

Number of Certified Peer Specialists

Baseline Measurement:

800

First-year target/outcome measurement:

850

Second-year target/outcome measurement:

900

New Second-year target/outcome measurement *(if needed)*:

Data Source:

DBH Recovery Services Unit

New Data Source *(if needed)*:

Description of Data:

The number of Certified Peer Specialists is tracked by DBH Recovery Services Unit.

New Description of Data *(if needed)*:

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of Certified Peer Specialists in FY 2020 is 1,003.

Indicator #: 2

Indicator: Number of contracts for Consumer Operated Service Programs (e.g. Drop-In Centers and Peer Support Warm Lines) for persons with mental illness per fiscal year

Baseline Measurement: 9

First-year target/outcome measurement: 9

Second-year target/outcome measurement: 9

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Contracts Unit

New Data Source(if needed):

Description of Data:

Contracts are maintained by the DMH Contracts Unit.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of Consumer Operated Service Programs for persons with mental illness in FY 2020 is 9.

Indicator #: 3

Indicator: Number of IPS SE programs per fiscal year

Baseline Measurement: 20

First-year target/outcome measurement: 20

Second-year target/outcome measurement: 20

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Staff

New Data Source(if needed):

Description of Data:

The number of IPS Supported Employment is tracked by DMH Staff.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of Supported Employment programs in FY 2020 is 26.

Indicator #:

4

Indicator:

Number of families receiving family support per fiscal year

Baseline Measurement:

1,001

First-year target/outcome measurement:

at least 900

Second-year target/outcome measurement:

at least 900

New Second-year target/outcome measurement(if needed):

Data Source:

Children's Services Unit.

New Data Source(if needed):

Description of Data:

The number of Family Support trainings is tracked by the Children's Services Unit.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of families receiving family support in FY 2020 is 3,585.

Indicator #:

5

Indicator: Number of Recovery Support Providers

Baseline Measurement: 53

First-year target/outcome measurement: 50

Second-year target/outcome measurement: 50

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Contracts Unit

New Data Source(if needed):

Description of Data:

Contracts are mainlined by the DMH Contracts Unit.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of Recovery Support providers in FY 2020 is 53.

Priority #: 6

Priority Area: Medication Assisted Treatment for Addiction

Priority Type: SAT

Population(s): PWDC, Other (Rural, Criminal/Juvenile Justice, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

To further integrate medication therapy into the substance use disorder treatment service delivery system.

Strategies to attain the goal:

- 1) Monitor utilization of MAT by provider and provide technical assistance as needed.
- 2) Increase utilization of different medications used in MAT at a given treatment provider.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of consumers receiving medication therapy per fiscal year

Baseline Measurement: 6,488

First-year target/outcome measurement: at least 6,000

Second-year target/outcome measurement: at least 6,000

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system and Medicaid claims

New Data Source(if needed):

Description of Data:

Number of consumers receiving medication assisted treatment including use of methadone, Vivitrol, naltrexone, buprenorphine-containing medications, Antabuse and acamprosate (and any future FDA-approved MAT medication) is determined from billings excluding billings occurring while in detox.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

none

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of consumers receiving medication therapy in FY 2020 is 7,541.

Priority #: 7

Priority Area: Community Advocacy and Education

Priority Type: SAP

Population(s): PP, Other (Adolescents w/SA and/or MH, Students in College, Rural, Children/Youth at Risk for BH Disorder, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

Create positive community norms; policy change; promote mental wellness; and reduce alcohol, tobacco and other drug availability in Missouri's communities.

Strategies to attain the goal:

- 1) Build state and community capacity for fostering strong partnerships and identifying new opportunities for collaboration.
- 2) Further data capacity in support of data-driven strategic planning to include the continuation of the Missouri Student Survey and the Behavioral Health web tool.
- 3) Fund evidence-based programming to prevent substance use and bullying among high-risk youth.
- 4) Continue the education initiative in Eastern Missouri to address heroin and other opiate drug use.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of schools educated in Signs of Suicide

Baseline Measurement: N/A

First-year target/outcome measurement: at least 80

Second-year target/outcome measurement: at least 80

New Second-year target/outcome measurement(if needed):

Data Source:

DBH Contracted Providers

New Data Source(if needed):

Description of Data:

The number of schools educated in Signs of Suicide is tracked and reported by contracted providers.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of schools educated in Signs of Suicide in FY 2020 is 82

Indicator #:

2

Indicator:

Number of high-risk youth served in prevention programs per fiscal year

Baseline Measurement:

3,133

First-year target/outcome measurement:

at least 3,000

Second-year target/outcome measurement:

at least 3,000

New Second-year target/outcome measurement(if needed):

Data Source:

DBH Contracted Providers.

New Data Source(if needed):

Description of Data:

Number of high-risk youth served in prevention programs is tracked and reported by contracted providers.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

The number of high-risk youth served in prevention programs in FY 2020 was 2,960. Due to the COVID-19 pandemic, prevention programs were transitioned to virtual format which resulted in fewer youth reached.

How first year target was achieved (optional):

Indicator #: 3

Indicator: Number of persons trained in MHFA per fiscal year

Baseline Measurement: 7,200

First-year target/outcome measurement: at least 6,500

Second-year target/outcome measurement: at least 6,500

New Second-year target/outcome measurement(if needed):

Data Source:

DBH Prevention Unit.

New Data Source(if needed):

Description of Data:

The number trained in MHFA is tracked by DBH prevention staff.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of persons trained in Mental Health First Aid in FY 2020 is 6,600

Priority #: 8

Priority Area: School-Based Prevention Education

Priority Type: SAP

Population(s): PP, Other (Adolescents w/SA and/or MH, Children/Youth at Risk for BH Disorder)

Goal of the priority area:

To delay onset of substance use, reduce use, improve overall school performance, and reduce incidents of violence.

Strategies to attain the goal:

- 1) Enhance protective factors and reverse or reduce risk factors for substance use and violence.
- 2) Improve academic and social-emotional learning to address risk factors.
- 3) Employ interactive techniques that allow for active involvement in learning.
- 4) Reinforce prevention skills over time with repeated interventions.
- 5) Ensure programming is culturally competent and age appropriate.
- 6) Conduct annual fidelity reviews.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of students participating in SPIRIT per fiscal year

Baseline Measurement: 9,354

First-year target/outcome measurement: at least 8,000

Second-year target/outcome measurement: at least 8,000

New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Institute for Mental Health (MIMH)

New Data Source(if needed):

Description of Data:

SPIRIT participation is tracked and reported by the program evaluator MIMH.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of students participating in SPIRIT in FY 2020 is 9,834.

Indicator #: 2

Indicator: Annual report generated

Baseline Measurement: Yes

First-year target/outcome measurement: Yes

Second-year target/outcome measurement: Yes

New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Institute for Mental Health (MIMH)

New Data Source(if needed):

Description of Data:

MIMH generates the annual report which is posted to the DMH public website.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Annual SPIRIT Report was generated and posted to the DMH website.

Priority #: 9

Priority Area: Prescription Drug Overdose Deaths

Priority Type: SAP

Population(s): PWWDC, PWID, Other (Rural, Criminal/Juvenile Justice, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

Prevent Opioid-related deaths and connect individuals experiencing overdose events to SUD treatment

Strategies to attain the goal:

- 1) Increase the number of first responders, medical professionals, and other eligible groups trained to carry and administer naloxone.
- 2) Increase public awareness of opioid risks and best practices for assisting during an overdose event.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of individuals trained to carry and administer naloxone per fiscal year

Baseline Measurement: 6,564

First-year target/outcome measurement: 4,000

Second-year target/outcome measurement: 4,000

New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Institute for Mental Health (MIMH)

New Data Source(if needed):

Description of Data:

The number of individuals trained to carry and administer naloxone is tracked and reported by MIMH.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of individuals trained to carry and administer naloxone in FY 2020 is 6,228.

Indicator #: 2

Indicator: Number of doses of naloxone distributed per fiscal year

Baseline Measurement: 17,880
First-year target/outcome measurement: at least 8,000
Second-year target/outcome measurement: at least 8,000
New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Institute for Mental Health (MIMH)

New Data Source(if needed):

Description of Data:

The number of naloxone doses distributed is tracked and reported by MIMH.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of doses of naloxone distributed in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State Opioid Response (SOR) Grant and the Missouri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG Primary Prevention funds were utilized for this effort.

Priority #: 10

Priority Area: Evidence-based Mental Health Practices

Priority Type: MHS

Population(s): SMI, SED

Goal of the priority area:

Continue evidence-based practice to the same standards and fidelity as shown to be effective in research.

Strategies to attain the goal:

- 1) Continue to support EBP programs.
- 2) Provide on-going monitoring of fidelity in EBP programs.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of adults served in ITCD per fiscal year
Baseline Measurement: 2,867
First-year target/outcome measurement: at least 2,000
Second-year target/outcome measurement: at least 2,000
New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):**Description of Data:**

Number of ITCD consumers is determined from paid encounters for ITCD services.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number of adults served in ITCD in FY 2020 is 3,604.

Indicator #:

2

Indicator:

Number of adults served in ACT per fiscal year

Baseline Measurement:

692

First-year target/outcome measurement:

at least 650

Second-year target/outcome measurement:

at least 650

New Second-year target/outcome measurement(if needed):**Data Source:**

DMH Information System

New Data Source(if needed):**Description of Data:**

Number of ACT consumers is determined from paid encounters for ACT services.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number adults served in ACT in FY 2020 is 829.

Priority #: 11
Priority Area: Persons who inject drugs intravenously
Priority Type: SAT
Population(s): PWID

Goal of the priority area:

Ensure the provision of services to person who inject drugs in accordance with Substance Abuse Prevention and Treatment Block Grant statutory requirements

Strategies to attain the goal:

- 1) Monitor contractual requirements pertaining to PWID
- 2) Generate reports to monitor length of time to initiate treatment and percent engagement in treatment
- 3) Increase one-on-one discussions with key provider staff about data reports and target technical assistance as needed.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of persons who inject drugs served in substance use disorder treatment per fiscal year (assuming the same level of funding)
Baseline Measurement: 11,634
First-year target/outcome measurement: at least 10,000
Second-year target/outcome measurement: at least 10,000
New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system.

New Data Source(if needed):

Description of Data:

Persons who inject drugs are individuals for whom a paid claim on a substance use disorder treatment program was submitted to and paid by DMH. Injection drug use is determined from the TEDS data also captured in the DMH Information system as the route of administration for the substance as IV injection or non-IV injection on the primary, secondary or tertiary substances.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of persons who inject drugs served in substance use disorder treatment in FY 2020 is 12,830.

Indicator #: 2

Indicator: Average number of days from Initial Contact to first service for PWID per fiscal year

Baseline Measurement: 7.29

First-year target/outcome measurement: Less than 7

Second-year target/outcome measurement: Less than 7

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Information System

New Data Source(if needed):

Description of Data:

The average number of calendar days between the Initial Contact date and the date of the first paid encounter for consumers who reported injection method at admission per fiscal year.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The average number of days from Initial Contact to the first service for the PWID population in FY 2020 is 4.91 days.

Indicator #: 3

Indicator: Percent of persons who inject drugs who have engaged in treatment per fiscal year

Baseline Measurement: 85%

First-year target/outcome measurement: at least 80%

Second-year target/outcome measurement: at least 80%

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Information System

New Data Source(if needed):

Description of Data:

The percent of the persons who reported injection method at admission who had at least 3 paid encounters during the treatment program per fiscal year.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The percent of the PWID population who have engaged in treatment in FY 2020 is 84%

Priority #: 12

Priority Area: Substance use treatment for Pregnant Women and Women with Dependent Children

Priority Type: SAT

Population(s): PWWDC

Goal of the priority area:

Continue to provide services to pregnant women and women with dependent children

Strategies to attain the goal:

- 1) Monitor contractual compliance with regard to admission of pregnant women to substance use disorder treatment.
- 2) Continue collecting wait list and capacity management data for contracted providers.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of pregnant women and women with dependent children served in substance use disorder treatment per fiscal year (assuming the same level of funding)

Baseline Measurement: 6,433

First-year target/outcome measurement: at least 5,900

Second-year target/outcome measurement: at least 5,900

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Information System

New Data Source(if needed):

Description of Data:

The number of pregnant women and women with dependent children served is captured in the DMH information system. These are individuals for which a paid claim was submitted and paid by DMH. Pregnancy status and number of dependent children are captured in the DMH information system.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of pregnant women or women with dependent children served in substance use disorder treatment in FY 2020 is 6,497.

Priority #: 13
Priority Area: Mental Health Services for Transition-Aged Youth and Young Adults
Priority Type: MHS
Population(s): SMI, SED

Goal of the priority area:

Promote collaboration, implementation of effective interventions and supports, and enhance skills of individuals who work with transition-aged youth, young adults and their families with behavioral health needs including those that may be at risk of a First Episode Psychosis.

Strategies to attain the goal:

- 1) Continue to participate in the Oversight Advisory Group which focuses on the needs of youth/young adults with behavioral health issues including being at risk of or experience First Episode Psychosis.
- 2) Provide education on the importance of advocacy, prevention, early identification/intervention, and evidence-based treatment.
- 3) Provide training on evidence-based and promising practices.
- 4) Expand Integrated Treatment for Co-Occurring Disorders (ITCD) services to meet the unique needs of the transition-aged youth/young adult population.
- 5) Promote ACT TAY programs statewide.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of education sessions per fiscal year
Baseline Measurement: 13
First-year target/outcome measurement: 4
Second-year target/outcome measurement: 4

New Second-year target/outcome measurement(if needed):

Data Source:

The DBH Children's Unit tracks education sessions.

New Data Source(if needed):

Description of Data:

The number of education sessions are tracked and reported by the DMH Children's Unit.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

None

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of education sessions in FY 2020 is 11.

Indicator #: 2
Indicator: Number of Evidence-Based Practice related provide trainings per fiscal year
Baseline Measurement: 6
First-year target/outcome measurement: 4
Second-year target/outcome measurement: 4

New Second-year target/outcome measurement(if needed):

Data Source:

The DBH Children's Unit tracks EBP related trainings.

New Data Source(if needed):

Description of Data:

The number of Evidence Based Practice- related trainings for Mental Health transition-aged youth and young adults are tracked and reported by the DMH Children's Unit.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

none

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The number of Evidence-Based Practice related provider trainings in FY 2020 is 8.

Indicator #: 3
Indicator: Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year
Baseline Measurement: 53
First-year target/outcome measurement: 50
Second-year target/outcome measurement: 50

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system.

New Data Source(if needed):

Description of Data:

The number of Transition-Aged Youth/Young Adults served in ITCD is determined by paid encounters for ITCD services in youth community psychiatric services programs.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None.

New Data issues/caveats that affect outcome measures:**Report of Progress Toward Goal Attainment**

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number of Transition-Aged Youth or Young Adults served in ITCD in FY 2020 is 362.

Indicator #:

4

Indicator:

Number served in ACT TAY programs per fiscal year

Baseline Measurement:

529

First-year target/outcome measurement:

500

Second-year target/outcome measurement:

500

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

The number of consumers with paid encounters in the Youth Assertive Community Treatment program.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None.

New Data issues/caveats that affect outcome measures:**Report of Progress Toward Goal Attainment**

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number of Transition-Aged Youth or Young Adults served in ACT in FY 2020 is 549.

Priority #:

14

Priority Area:

Behavioral Healthcare services for Children

Priority Type:

MHS

Population(s):

SED

Goal of the priority area:

To enhance Children's Behavioral Health services by increasing the knowledge of effective services, supports and interventions, enhancing the skills of

service providers and expanding services based on the needs of the children, youth and families served.

Strategies to attain the goal:

- 1) Continue the statewide Adolescent CSTAR Committee focusing on the needs of youth/young adults with substance use issues. Committee will provide collaboration regarding issues of policy, training, treatment, funding, and outreach for adolescent substance use disorders.
- 2) Increase dissemination of research, best practices and success stories

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of meetings of the Adolescent CSTAR Committee per fiscal year.

Baseline Measurement: 6

First-year target/outcome measurement: at least 4

Second-year target/outcome measurement: at least 4

New Second-year target/outcome measurement(if needed):

Data Source:

DBH Children's Unit

New Data Source(if needed):

Description of Data:

The number of meetings is tracked and reported by the DBH Children's Unit.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

None.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

The number of meetings of the Adolescent CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the COVID-19 pandemic.

How first year target was achieved (optional):

Indicator #: 2

Indicator: Number of posts of articles, research, and stories specific to behavioral healthcare for children per fiscal year

Baseline Measurement: 25

First-year target/outcome measurement: 20

Second-year target/outcome measurement: 20

New Second-year target/outcome measurement(if needed):

Data Source:

DBH Children's Unit

New Data Source(if needed):

Description of Data:

The number of postings is tracked and reported by the DBH Children's Unit.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

None.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

The number of posts of articles, research, and stories specific to behavioral healthcare for children in FY 2020 is 23.

0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

C. State Agency Expenditure Reports

MHBG Table 3 - Set-aside for Children’s Mental Health Services

Reporting Period Start Date: 7/1/2019 Reporting Period End Date: 6/30/2020

Statewide Expenditures for Children's Mental Health Services			
Actual SFY 1994	Actual SFY 2019	Estimated/Actual SFY 2020	Expense Type
\$14,716,201	\$34,699,311	\$43,993,889	<input checked="" type="radio"/> Actual <input type="radio"/> Estimated

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

States and jurisdictions are required not to spend less than the amount expended in FY 1994.

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 6 - Maintenance of Effort for State Expenditures on Mental Health Services

Reporting Period Start Date: 07/01/2019 Reporting Period End Date: 06/30/2020

Period	Expenditures	<u>B1(2018) + B2(2019)</u> 2
(A)	(B)	(C)
SFY 2018 (1)	\$209,836,767	
SFY 2019 (2)	\$217,302,364	\$213,569,566
SFY 2020 (3)	\$246,570,637	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2018	Yes	<u>X</u>	No	_____
SFY 2019	Yes	<u>X</u>	No	_____
SFY 2020	Yes	<u>X</u>	No	_____

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

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Footnotes: